

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 01/30/2007
Michael N. Rader
Wolf, Greenfield & Sacks, P.C.
600 Atlantic Avenue
Boston, MA 02210
02/20/2007 SFELEKE2 00000028 232825 10732834

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

Note:
Fee(s)
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Mail Date: February 15, 2007

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[Depositor's name]

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/732,834	12/10/2003	Greg Reagan	B0932.70222US00	6764

TITLE OF INVENTION: LACE SYSTEM FOR FOOTWEAR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/30/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATTERSON, MARIE D	3728	036-050100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Wolf, Greenfield & Sacks P.C.
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Burton Corporation

Burlington, VT

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 232825 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Neil P. Ferraro

Date February 15, 2007

Typed or printed name Neil P. Ferraro

Registration No. 39,188

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,700.00)

Complete if Known

Application Number	10/732,834-Conf. #6764
Filing Date	December 10, 2003
First Named Inventor	Greg Reagan
Examiner Name	Patterson, Marie D
Art Unit	3728
Attorney Docket No.	B0932.70222US00

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.				

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
39	- 39 =	x	=	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	- 6 =	x	=

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 (round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1501 Utility issue fee

1504 Publication fee for early, voluntary, or normal ...

1,400.00

300.00

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		39,188	(617) 646-8000
Name (Print/Type)	Neil P. Ferraro	Date	February 15, 2007

Express Mail Label No. EV743785906US

Dated: February 15, 2007

From: Patterson, Marie [mailto:Marie.Patterson@USPTO.GOV]
Sent: Wednesday, January 10, 2007 8:24 AM
To: Ferraro, Neil
Subject: IFW-Issue Classification

Issue Classification *10732834*	Application/Control No.	Applicant(s)/Patent under Reexamination
	10/732,834	REAGAN ET AL.
	Examiner Marie Patterson	Art Unit 3728

ISSUE CLASSIFICATION										
ORIGINAL				CROSS REFERENCE(S)						
CLASS	SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
036	50.1			036	50.5					
INTERNATIONAL CLASSIFICATION										
A	4	3	C	11/00						
A	4	3	B	5/04						
				/						
				/						
				/						
(Assistant Examiner) (Date)					(Primary Examiner) (Date)					Total Claims Allowed: 124
(Legal Instruments Examiner) (Date)										O.G. Print Claim(s) 1

Claims renumbered in the same order as presented by applicant				CPA		T.D.		R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	1	35	31	61	91	121	151	76	181
2	2	36	32	62	92	122	152	77	182
3	3	37	33	63	93	123	153	78	183
4	4	38	34	64	94	124	154	79	184
5	5	39	35	65	95	125	155	80	185
6	6	40	36	66	96	126	156	81	186
7	7	41	37	67	97	61	127	82	187
8	8	42	38	68	98	29	128	83	188
9	9	43	39	69	99	25	129	84	189
10	10	44	40	70	100	26	130	85	190
11	11	45	41	71	101	59	131	86	191
12	12	46	42	72	102	55	132	87	192
13	13	47	43	73	103	56	133	88	193
14	14	48	44	74	104	30	134	89	194
15	15	49	45	75	105	57	135	90	195
16	16	50	46	76	106	58	136	91	196
17	17	51	47	77	107	62	137	92	197
18	18	52	48	78	108	63	138	93	198
19	19	53	49	79	109	64	139	94	199
20	20	54	50	80	110	65	140	95	200
21	21		51	81	111	66	141	96	201
22	22	60	52	82	112	67	142	97	202
23	23		53	83	113	68	143	98	203
24	24		54	84	114	69	144	99	204
27	25		55	85	115	70	145	100	205
28	26		56	86	116	71	146	101	206
31	27		57	87	117	72	147	102	207
32	28		58	88	118	73	148	103	208
33	29		59	89	119	74	149	104	209
34	30		60	90	120	75	150	105	210